

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 1 OF 10  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>House Majority PAC</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00495028         </div>		
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M / D D / Y Y Y Y Y Y         </div>					
Full Name of Payee <b>AMS Communications, Inc.</b>			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M / D D / Y Y Y Y Y Y            09 / 30 / 2014         </div>		
Mailing Address 500 Sansome St Ste 404			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           4215.00         </div>		
City State Zip Code San Francisco CA 94111-3218		<b>Transaction ID : VN7GD9VZ4D9</b> Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M / D D / Y Y Y Y Y Y         </div>			
Purpose of Expenditure Direct Mail - Estimate		Category/ Type			
Name of Federal Candidate David Young			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate		
Office Sought: <input checked="" type="checkbox"/> House District: 03 State: IA					
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
<div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           38301.00         </div>					
Full Name of Payee <b>Mission Control, Inc.</b>			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M / D D / Y Y Y Y Y Y            09 / 29 / 2014         </div>		
Mailing Address 114 Mansfield Hollow Rd # A			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           20937.90         </div>		
City State Zip Code Mansfield Center CT 06250-1316		<b>Transaction ID : VN7GD9VZ458</b> Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M / D D / Y Y Y Y Y Y         </div>			
Purpose of Expenditure Direct Mail - Estimate		Category/ Type			
Name of Federal Candidate Jeff Gorell			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate		
Office Sought: <input checked="" type="checkbox"/> House District: 26 State: CA					
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
<div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           164877.43         </div>					
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           25152.90         </div>		
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           0.00         </div>		
(c) <b>TOTAL</b> Independent Expenditures..... ▶			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           25152.90         </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Nicholas Pancrazio</u>			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M / D D / Y Y Y Y Y Y            10 / 01 / 2014         </div>		
			[Electronically Filed]		

NAME OF COMMITTEE (In Full) <b>House Majority PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 10px;">C</span> <span>C00495028</span> </div>
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <span style="font-size: 2em; margin: 0 10px;">➤</span> <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: flex; justify-content: space-around; width: 100%;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M /</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">D D /</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">Y Y Y Y</div> </div>	

Full Name of Payee <b>Mission Control, Inc.</b>		Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>09 / 29 / 2014</div> </div>	
Mailing Address 114 Mansfield Hollow Rd # A		Amount <div> <div>23830.96</div> </div>	
City Mansfield Center	State CT	Zip Code 06250-1316	<b>Transaction ID : VN7GD9VZ498</b> Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> </div>
Purpose of Expenditure Direct Mail - Estimate		Category/ Type	
Name of Federal Candidate Robert T. Schilling		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		<div> <div>95539.84</div> </div>	District: <u>17</u> State: <u>IL</u> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Murphy Vogel Askew Reilly LLC</b>		Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>09 / 30 / 2014</div> </div>	
Mailing Address 1199 N Fairfax St Ste 220		Amount <div> <div>10462.23</div> </div>	
City Alexandria	State VA	Zip Code 22314-1437	<b>Transaction ID : VN7GD9VZ4C2</b> Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> </div>
Purpose of Expenditure Media Production Costs - Estimate		Category/ Type	
Name of Federal Candidate Stewart Mills		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>08</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MN</u>
Calendar Year-To-Date Per Election for Office Sought <div> <div>688779.44</div> </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	▶	34293.19
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	▶	
(c) <b>TOTAL</b> Independent Expenditures.....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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Signature

Date \_\_\_\_\_

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 3 OF 10  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>House Majority PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00495028	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Putnam Partners LLC</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>09 / 30 / 2014</b>	
Mailing Address <b>1100 Vermont Ave NW</b> <b>Ste 1200</b>		Amount <b>6853.60</b>	
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20005-6327</b>	Transaction ID : <b>VN7GD9W4E59</b>
Purpose of Expenditure <b>Media Production Costs - Estimate</b>		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate <b>Michael L. Zeldin</b>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>01</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NY</b>
Calendar Year-To-Date Per Election for Office Sought		<b>316099.78</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Putnam Partners LLC</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>09 / 30 / 2014</b>	
Mailing Address <b>1100 Vermont Ave NW</b> <b>Ste 1200</b>		Amount <b>20229.95</b>	
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20005-6327</b>	Transaction ID : <b>VN7GD9W4E91</b>
Purpose of Expenditure <b>Media Production Costs - Estimate</b>		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate <b>Michael L. Zeldin</b>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>01</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NY</b>
Calendar Year-To-Date Per Election for Office Sought		<b>316099.78</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>27083.55</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Nicholas Pancrazio

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 4 OF 10  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>House Majority PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00495028	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Shorr Johnson Magnus</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>09 / 30 / 2014</b>	
Mailing Address 100 N 20th St Ste 201		Amount <b>10730.35</b>	
City Philadelphia	State PA	Zip Code 19103-1454	Transaction ID : VN7GD9VKAM3
Purpose of Expenditure Media Production Costs - Estimate		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Martha E. McSally		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Shorr Johnson Magnus</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>09 / 30 / 2014</b>	
Mailing Address 100 N 20th St Ste 201		Amount <b>8153.99</b>	
City Philadelphia	State PA	Zip Code 19103-1454	Transaction ID : VN7GD9W2M15
Purpose of Expenditure Media Production Costs - Estimate		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Martha E. McSally		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>18884.34</b>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 5 OF 10  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>House Majority PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00495028	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Shorr Johnson Magnus</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>09 / 30 / 2014</b>	
Mailing Address 100 N 20th St Ste 201		Amount <b>9690.63</b>	
City Philadelphia	State PA	Zip Code 19103-1454	Transaction ID : VN7GD9W2M31
Purpose of Expenditure Media Production Costs - Estimate		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Michael J. Bost		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>12</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>IL</b>
Calendar Year-To-Date Per Election for Office Sought		<b>161136.33</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>The Baughman Company, Inc.</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>09 / 29 / 2014</b>	
Mailing Address 42 Ratto Rd		Amount <b>11172.05</b>	
City Alameda	State CA	Zip Code 94502-7952	Transaction ID : VN7GD9W2M57
Purpose of Expenditure Direct Mail - Estimate		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Michael L. Zeldin		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>01</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NY</b>
Calendar Year-To-Date Per Election for Office Sought		<b>316099.78</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>20862.68</b>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Nicholas Pancrazio

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
(Schedule E)PAGE 6 OF 10  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>House Majority PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00495028	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>The Strategy Group</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>09 / 29 / 2014</b>		
Mailing Address 1140 Connecticut Ave NW 8th Floor			Amount 22734.79		
City Washington	State DC	Zip Code 20036-4023	Transaction ID : VN7GD9VZ466		
Purpose of Expenditure Direct Mail - Estimate		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate Robert J. Dold Jr.		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate		District: 10 State: IL
Calendar Year-To-Date Per Election for Office Sought		45209.82	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <b>Waterfront Strategies</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>09 / 30 / 2014</b>		
Mailing Address 3050 K St NW Ste 100			Amount 127741.13		
City Washington	State DC	Zip Code 20007-5108	Transaction ID : VN7GD9VZ4A6		
Purpose of Expenditure Television Advertising		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate Nick J. Rahall II		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate		District: 03 State: WV
Calendar Year-To-Date Per Election for Office Sought		1361308.70	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	150475.92
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

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Nicholas Pancrazio

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

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 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>House Majority PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00495028       </div>
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Waterfront Strategies</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 09 / 30 / 2014</div> </div>	
Mailing Address 3050 K St NW Ste 100		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">50636.12</div>	
City Washington	State DC	Zip Code 20007-5108	<b>Transaction ID : VN7GD9VZ4B4</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> </div>
Purpose of Expenditure Television Advertising	Category/Type		
Name of Federal Candidate Evan H. Jenkins		Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Waterfront Strategies</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 09 / 30 / 2014</div> </div>	
Mailing Address 3050 K St NW Ste 100		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">18319.00</div>	
City Washington	State DC	Zip Code 20007-5108	<b>Transaction ID : VN7GD9VZ4M5</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> </div>
Purpose of Expenditure Online Advertising	Category/Type		
Name of Federal Candidate Bruce L. Poliquin		Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: ME	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">68955.12</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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Nicholas Pancrazio

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
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NAME OF COMMITTEE (In Full) <b>House Majority PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00495028	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Waterfront Strategies</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>09 / 30 / 2014</b>	
Mailing Address 3050 K St NW Ste 100		Amount 134629.43	
City Washington	State DC	Zip Code 20007-5108	Transaction ID : VN7GD9VZ4P1
Purpose of Expenditure Television Advertising	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Martha E. McSally		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Waterfront Strategies</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>09 / 30 / 2014</b>	
Mailing Address 3050 K St NW Ste 100		Amount 89132.40	
City Washington	State DC	Zip Code 20007-5108	Transaction ID : VN7GD9VZ4R6
Purpose of Expenditure Television Advertising	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Stewart Mills		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MN
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	223761.83
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

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NAME OF COMMITTEE (In Full) <b>House Majority PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00495028	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Waterfront Strategies</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>09 / 30 / 2014</b>	
Mailing Address 3050 K St NW Ste 100		Amount 277844.18	
City Washington	State DC	Zip Code 20007-5108	Transaction ID : VN7GD9VZ4S4
Purpose of Expenditure Television Advertising	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Michael L. Zeldin		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Waterfront Strategies</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>09 / 30 / 2014</b>	
Mailing Address 3050 K St NW Ste 100		Amount 151445.70	
City Washington	State DC	Zip Code 20007-5108	Transaction ID : VN7GD9VZ4T2
Purpose of Expenditure Television Advertising	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Michael J. Bost		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 12 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IL
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	429289.88
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Nicholas Pancrazio

[Electronically Filed]

Date

MM / DD / YYYY  
10 / 01 / 2014

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

PAGE	10	OF	10
FOR SE OF FORM 24/48			

NAME OF COMMITTEE (In Full) <b>House Majority PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00495028	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Waterfront Strategies</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>09 / 30 / 2014</b>	
Mailing Address 3050 K St NW Ste 100		Amount <b>15799.00</b>	
City Washington	State DC	Zip Code 20007-5108	Transaction ID : VN7GD9W2T90
Purpose of Expenditure Online Advertising	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Evan H. Jenkins		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>03</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>WV</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Waterfront Strategies</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>09 / 30 / 2014</b>	
Mailing Address 3050 K St NW Ste 100		Amount <b>15799.00</b>	
City Washington	State DC	Zip Code 20007-5108	Transaction ID : VN7GD9W2TC4
Purpose of Expenditure Online Advertising	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Martha E. McSally		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>02</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>AZ</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<b>31598.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	<b>1030357.41</b>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Nicholas Pancrazio

[Electronically Filed]

Date

MM / DD / YYYY  
**10 / 01 / 2014**

Signature